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Date: March 20, 2007

To: Examiner Anuradha Ra	Fax: 571-273-	Use this tax number only		
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From: Bret Field	Phone: (650) 83	3-7770 Return	Fax: (650) 32	7-3231
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Fax Contains: 7 pages (includ	ling this sheet). If incom	olete, call Christa Carte	er (650) 833-7708	·
Group Art Unit	tember 11, 2003	**************************************		<u></u>
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Ref: SKEL-012	Return Original	to: Christa Carter		Location:

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB\_control number. 10/661,358 **Application Number** September 11, 2003 Filing Date TRANSMITTAL First Named Inventor **FORM** YETKINLER, DURAN Group Art Unit 3733 (to be used for all correspondence after initial filling) RAMANA, ANURADHA Examiner Name Attorney Docket Number **SKEL-012** Total Number of Pages In This Submission ENCLOSURES (check all that apply) M Fee Transmittal Form (In . After Allowance Communication Assignment Papers duplicate, 2 pages) (for an Application) to Group Drawing(s) Appeal Communication to Board Fee Attached of Appeals and Interferences (in duplicate, 2 pages) LicensIng-related Papers Appeal Communication to Group Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) Provisional Application Status Letter Power of Attorney, Revocation Extension of Time Request Change of Correspondence 図 Other Enclosure(s) (please Address Express Abandonment Request identify below): Terminal Disclaimer \* Terminal Disclaimer (1 page) Information Disclosure Statement Request for Refund Certified Copy of Priority Documents CD, Number of CD(s) Response to Missing Parts/ Remarks Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Flm BRET E. FIELD, Reg. No. 37,620 Individual Name Signature Date April 9, 2007 CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this correspondence is being facsimile filed under 37 C.F.R. §§ 1.6(d) and 1.8(a)(1)(b) addressed to: 571-273-4718 on this date: April 9, 2007

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Christa D. Carter

Typed or printed name

Signature

PTO/SB/17 (07-06)

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Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete If Known Effective on 12/08/2004. 10/661,356 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number September 11, 2003 BECEIVED FEE TRANSMITTAL Filing Date CENTRAL FAX CENTER YETKINLER, DURAN First Named Inventor For FY 2006 RAMANA, ANURADHA Examiner Name APR 0 9 2007 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3733 SKEL-012 Attorney Docket No. TOTAL AMOUNT OF PAYMENT (\$) 65.00 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): \_ Deposit Account Deposit Account Number: 50-0815 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public, Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES Small Entity Small Entity Small Entity Fees Pald (\$) Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 130 65 Design 200 100 100 50 150 160 80 Plant 200 100 300 Reissue 300 150 500 250 600 300 0 Provisional 200 100 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissucs) 50 25 Each independent claim over 3 (including Reissues) 100 Multiple dependent claims 360 180 Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Total Sheets Extra Sheets Fee Paid (\$) 100 = /50 = (round up to a whole number) 4. OTHER FEE(S) Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: 2814 Statutory Disclaimer Fee 65.00 SUBMITTED BY Registration No. Signature Telephone 650.327.3400

Signature Registration No.

Name (Print/Type) Bret E. Field Date 04/09/2007

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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SENO FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Design	200	100	100	50	130			ļ
Plant	200	100	300	150	16			
Reissue	300	150	500	250	60	-		
Provisional	200	100	0	0	0	0 .		•
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Docket Number (Optional)

SKEL-012

In re Application of: YETKINLER, DURAN

Application No.: 10/661,358 Filed: September 11, 2003

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For: METHODS AND DEVICES FOR DELIVERING ORTHOPEDIC CEMENTS TO A TARGET BONE SITE

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The owner\*, SKELETAL KINETICS, LLC, of 100 percent interest in the instant application hereby disclaims, except as provided below, the terminal part of the statutory term of any patent granted on the instant application which would extend beyond the expiration date of the full statutory term of any patent granted on pending reference Application Number 10/797,907, filed on March 9, 2004, as such term is defined in 35 U.S.C. 154 and 173, and as the term of any patent granted on said reference application may be shortened by any terminal disclaimer filed prior to the grant of any patent on the pending reference application. The owner hereby agrees that any patent so granted on the instant application shall be enforceable only for and during such period that it and any patent granted on the reference application are commonly owned. This agreement runs with any patent granted on the instant application and is binding upon the grantee, its successors or assigns.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

2. The undersigned is an attorney or agent of record. Reg. No. 37,620

April 9, 2007

Signature

Bret E. Field

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